



Application No. (if known): 09/787,196

Attorney Docket No.: 55729 (71526)

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48,399

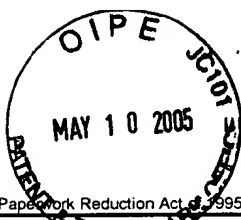
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Petition to Withdraw Application From Issue (RCE) (2 pages)  
Petition Fee Transmittal (1 page)  
Request for Continued Examination Transmittal (1 page)  
RCE Fee Transmittal (1 page)  
Information Disclosure Statement (2 pages)  
IDS (Citation) by Applicant (7 References) (1 page)  
Charge \$920.00 to deposit account 04-1105



PTO/SB/17 (12-04v2)

Approved for use through 7/31/2006. OMB 0651-0032

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<b>FEE TRANSMITTAL</b> For FY 2005  <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		<b>Complete if Known</b>			
		Application Number	09/787,196		
		Filing Date	April 26, 2001		
		First Named Inventor	Ichiro Hirao		
		Examiner Name	M. C. Henry		
TOTAL AMOUNT OF PAYMENT		(\$)	920.00	Art Unit	1623
				Attorney Docket No.	55729 (71526)

**METHOD OF PAYMENT** (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_

☒ Deposit Account Deposit Account Number: 04-1105 Deposit Account Name: Edwards & Angell, LLP

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☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

**FEE CALCULATION**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

Fee Description	Small Entity	
	Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
_____	- 20 = _____	x _____ = _____				

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
_____	- 3 = _____	x _____ = _____	

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
_____	- 100 = _____	/50 _____ (round up to a whole number) x _____ = _____		

4. OTHER FEE(S)		Fees Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)		
Other (e.g., late filing surcharge):		
1801 Request for continued examination (RCE) (see 37 ...		790.00
1464 Petition Fees under 37 CFR 1.17(h)		130.00

<b>SUBMITTED BY</b>			
Signature		Registration No. (Attorney/Agent)	48,399
Name (Print/Type)	John B. Alexander, Ph.D.	Telephone	(617) 439-4444
		Date	May 10, 2005

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Dated: May 10, 2005

Signature: (Michelle Chicos)